510(k) Summary

510(k) Summary of Safety and Effectiveness As required by 809.92(a)(2).

SPECIAL 510 (k) PREMARKET NOTIFICATION NUMBER: K120836

JUL 1 2 2012

Submitter and Owner of the 510(k)

· AMUSA 5209 Linbar Dr., Suite 640 Nashville, TN 37211 Phone: 615-833-2633 Fax: 615-831-1817

Official Correspondent

Karen Thomison Director of Quality Assurance **AMUSA** 5209 Linbar Dr., Suite 640 Nashville, TN 37211 Phone: 615-833-2633 Fax: 615-831-1817

Date of Preparation

3/13/12

510(k) Application Number

Trade/Proprietary Name

0.9% Sodium Chloride Flush Syringe

Common Name/Usual Name

Saline Flush Syringe

Device Classification Name

Device, Flush, Vascular Access

Regulation Number

880.5200

Device Class

Class II Device

AMUSA Sterile/Sterile 510(k)

510(k) Summary

Classification Panel

General Hospital

Classification Product Code

NGT

INDICATIONS FOR USE

Intended use: 0.9% Sodium Chloride Flush Syringes are intended for use in flushing compatible intravenous administration sets and indwelling intravenous access devices. Use according to the recommendations of the manufacturer for the appropriate device.

DEVICE DESCRIPTION:

The Predicate Device, 510(k) Number: K111034, cleared on July14, 2011 consists of a plastic syringe filled with 0.9% Sodium Chloride Flush Solution that is terminally sterilized. The predicate device is fluid path sterile with a Sterility Assurance Level (SAL) of 10⁻⁶. This is a single use device packaged in a dust cover.

The Modified Device, the subject of this 510 (k), consists of a plastic syringe filled with 0.9% Sodium Chloride Flush Solution that is terminally sterilized. The modified device has a sterile package that maintains the sterility of the fluid, fluid path and the exterior of the device. The modified device can be used in a sterile field if the package is not open and aseptic techniques are followed. The Sterility Assurance Level (SAL) is 10^{-6} . This is a single use device.

Technical Data: The technical characteristics of the syringe for the modified device do not differ from those of the currently marketed device. These syringes have the same design, the same fundamental scientific characteristics, and have the same intended use. The proposed modification involves a change in packaging by substitution the dust cover with a sterile barrier system. The labeling was also changed to include instructions for use in a sterile field. All other aspects of the syringe design remain the same.

Substantial Equivalence: Non-clinical verification testing for the proposed change involved chemical-physical, functional, and package validation studies. The result of testing conducted verifies that the change in sterile packaging of the modified device performed in an equivalent manner to the predicate device and is safe and effective when used as intended. Other companies have FDA clearance for special 510(k)s submitted with similar changes.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service



Food and Drug Administration 10903 New Hampshire Avenue Document Control Room –WO66-G609 Silver Spring, MD 20993-0002

Ms. Karen Thomison
Director of Quality and Regulatory Affairs
AMUSA
5209 Linbar Drive, Suite 640
Nashville, Tennessee 37211

JUL 1 2 2012

Re: K120836

Trade/Device Name: 0.9% Sodium Chloride Flush Syringe

Regulation Number: 21 CFR 880.5200 Regulation Name: Intravascular Catheter

Regulatory Class: II Product Code: NGT Dated: June 11, 2012 Received: June 13, 2012

Dear Ms. Thomison:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to

http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Anthony D. Watson, B.S., M.S., M.B.A.

Director

Division of Anesthesiology, General Hospital, Infection Control and Dental Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Indications for Use

Indications for Use Statement

510(k) Number (if known):	
Device Name: 0.9% Sodium Chloride	Flush Syringe
Indications for Use:	
"0.9% Sodium Chloride Flush Syringe compatible intravenous administration devices. Use according to the recommappropriate device".	es are intended for use in flushing a sets and indwelling intravenous access anendations of the manufacturer for the
Prescription Use X (Part 21 CFR 801 Subpart D)	ND/OR Over-The-Counter Use (21 CFR 801 Subpart C)
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Concurrence of CDRH, O	ffice of Device Evaluation (ODE)

(Division Sign-Off)

Oivision of Anesthesiology, General Hospital infection Control, Dental Devices

510(k) Number: <u>K 120836</u>